



Figure 2. Goldmann Perimeter Chart

52c

(Authority: 38 U.S.C. 1155)

[53 FR 30262, Aug. 11, 1988, as amended at 73 FR 66549, Nov. 10, 2008; 74 FR 7648, Feb. 19, 2009]

**§ 4.78 Muscle function.**

(a) *Examination of muscle function.* The examiner must use a Goldmann perimeter chart that identifies the four major quadrants (upward, downward, left and right lateral) and the central field (20 degrees or less) (see Figure 2). The examiner must chart the areas of diplopia and include the plotted chart with the examination report.

(b) *Evaluation of muscle function.* (1) An evaluation for diplopia will be assigned to only one eye. When a claimant has both diplopia and decreased visual acuity or visual field defect, assign a level of corrected visual acuity

for the poorer eye (or the affected eye, if disability of only one eye is service-connected) that is: one step poorer than it would otherwise warrant if the evaluation for diplopia under diagnostic code 6090 is 20/70 or 20/100; two steps poorer if the evaluation under diagnostic code 6090 is 20/200 or 15/200; or three steps poorer if the evaluation under diagnostic code 6090 is 5/200. This adjusted level of corrected visual acuity, however, must not exceed a level of 5/200. Use the adjusted visual acuity for the poorer eye (or the affected eye, if disability of only one eye is service-connected), and the corrected visual

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acuity for the better eye (or visual acuity of 20/40 for the other eye, if only one eye is service-connected) to determine the percentage evaluation for visual impairment under diagnostic codes 6065 through 6066.

(2) When diplopia extends beyond more than one quadrant or range of degrees, evaluate diplopia based on the quadrant and degree range that provides the highest evaluation.

(3) When diplopia exists in two separate areas of the same eye, increase the equivalent visual acuity under diagnostic code 6090 to the next poorer level of visual acuity, not to exceed 5/200.

(Authority: 38 U.S.C. 1155)

[73 FR 66550, Nov. 10, 2008]

### § 4.79 Schedule of ratings—eye.

#### DISEASES OF THE EYE

|  | Rating |
|--|--------|
| 6000 Choroidopathy, including uveitis, iritis, cyclitis, and choroiditis.  |        |
| 6001 Keratopathy.  |        |
| 6002 Scleritis.  |        |
| 6006 Retinopathy or maculopathy.   |        |
| 6007 Intraocular hemorrhage.   |        |
| 6008 Detachment of retina.   |        |
| 6009 Unhealed eye injury.  |        |
| <b>General Rating Formula for Diagnostic Codes 6000 through 6009</b>   |        |
| Evaluate on the basis of either visual impairment due to the particular condition or on incapacitating episodes, whichever results in a higher evaluation.   |        |
| With incapacitating episodes having a total duration of at least 6 weeks during the past 12 months .....   | 60     |
| With incapacitating episodes having a total duration of at least 4 weeks, but less than 6 weeks, during the past 12 months .....   | 40     |
| With incapacitating episodes having a total duration of at least 2 weeks, but less than 4 weeks, during the past 12 months .....   | 20     |
| With incapacitating episodes having a total duration of at least 1 week, but less than 2 weeks, during the past 12 months .....  | 10     |
| <b>Note:</b> For VA purposes, an incapacitating episode is a period of acute symptoms severe enough to require prescribed bed rest and treatment by a physician or other healthcare provider.  |        |
| 6010 Tuberculosis of eye:  |        |
| Active .....   | 100    |
| Inactive: Evaluate under § 4.88c or § 4.89 of this part, whichever is appropriate.   |        |
| 6011 Retinal scars, atrophy, or irregularities:  |        |
| Localized scars, atrophy, or irregularities of the retina, unilateral or bilateral, that are centrally located and that result in an irregular, duplicated, enlarged, or diminished image .....  | 10     |
| Alternatively, evaluate based on visual impairment due to retinal scars, atrophy, or irregularities, if this would result in a higher evaluation.  |        |
| 6012 Angle-closure glaucoma:   |        |
| Evaluate on the basis of either visual impairment due to angle-closure glaucoma or incapacitating episodes, whichever results in a higher evaluation.  |        |
| With incapacitating episodes having a total duration of at least 6 weeks during the past 12 months .....   | 60     |
| With incapacitating episodes having a total duration of at least 4 weeks, but less than 6 weeks, during the past 12 months .....   | 40     |
| With incapacitating episodes having a total duration of at least 2 weeks, but less than 4 weeks, during the past 12 months .....   | 20     |
| Minimum evaluation if continuous medication is required .....  | 10     |
| <b>Note:</b> For VA purposes, an incapacitating episode is a period of acute symptoms severe enough to require prescribed bed rest and treatment by a physician or other healthcare provider.  |        |
| 6013 Open-angle glaucoma:  |        |
| Evaluate based on visual impairment due to open-angle glaucoma.  |        |
| Minimum evaluation if continuous medication is required .....  | 10     |
| 6014 Malignant neoplasms (eyeball only):   |        |
| Malignant neoplasm of the eyeball that requires therapy that is comparable to that used for systemic malignancies, <i>i.e.</i> , systemic chemotherapy, X-ray therapy more extensive than to the area of the eye, or surgery more extensive than enucleation .....   | 100    |
| <b>Note:</b> Continue the 100-percent rating beyond the cessation of any surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. Six months after discontinuance of such treatment, the appropriate disability rating will be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination will be subject to the provisions of § 3.105(e) of this chapter. If there has been no local recurrence or metastasis, evaluate based on residuals. |        |
| Malignant neoplasm of the eyeball that does not require therapy comparable to that for systemic malignancies:  |        |
| Separately evaluate visual impairment and nonvisual impairment, <i>e.g.</i> , disfigurement (diagnostic code 7800), and combine the evaluations.   |        |
| 6015 Benign neoplasms (of eyeball and adnexa):   |        |